Cannabis Business Registration

Zoning Code Compliance

carmabis basiness registration	Since 1857					
Application Type:	Hastings					
☐ Initial ☐ Renewal	MINNESOTA					
Business Type:						
☐ Microbusiness (with retail endorsement)	☐ Cannabis Transporter					
☐ Mezzobusiness (with retail endorsement)	☐ Cannabis Testing Facility					
☐ Cannabis Cultivator	☐ Cannabis Delivery Service					
☐ Cannabis Manufacturer	☐ Lower-Potency Hemp Edible Manufacturer					
Cannabis Retailer	Lower-Potency Hemp Edible Retailer (per retail location)					
Cannabis Wholesaler	☐ Beverages Only					
	☐ Beverages AND Edibles					
REGISTRATION CHECKLIST: To prevent delay, please ensure the following information is submitted. □ Registration of Cannabis Business Form □ Cannabis Business Safety Plan □ Registration Fee(s) (non-refundable) □ Certificate of Insurance listing the City of Hastings as additionally insured □ Color Copy of Current Driver's License or Government-Issued Identification Card □ Copy of the Office of Cannabis Management License for the Business						
REGISTRATION PROCESS: ☐ Return the complete registration packet and the required fee(s) to the Deputy City Clerk. ☐ Please allow ten (10) business days after all materials have been received for review. ☐ All inspections must be completed before the request will be considered for approval by the City Council.						
OFFICE	USE ONLY					
Registration Received Fees and Other City Charges						
Received By:	Verified By:					
Date Received:	Date Verified:					
Time Received: A.M. / P.M.	Inspections					

Verified By: Date Inspected: Date Verified: **Ready for City Council Consideration Property Tax & Assessment Review** Verified By: Verified By: Date Verified: Date Verified: Time Verified: A.M. / P.M.

Inspected By:

Business Information				
Business Name:				
DBA:				
Address:				
City/State/Zip Code:				
Applicant Information				
Name:				
Address:				
City/State/Zip Code:				
Phone Number:				
Email Address:				
Property Owner Information (if different than above)				
Name:				
Address:				
City/State/Zip Code:				
Phone Number:				
Email Address:				
Property Information				
Property Address:				
Parcel ID (found on Dakota County GIS):				
City Zoning District (<u>found on City of Hastings Zoning Map</u>):				
Ordinance, Zoning, and Certifications (Please initial)				
I hereby acknowledge that I have read, understand, and agree to abide by the regulations set forth in the City's Ordinance associated with the license for which I am applying. Furthermore, I also understand that I must comply with the provisions of all applicable state laws.				
I hereby certify that all property taxes and assessments are current.				
I hereby certify that my business is current on payment(s) of all other City fees and charges.				
Please complete the following if your business holds a current On-Sale and/or Off-sale Intoxicating liquor license				
with the City of Hastings.				
I acknowledge and certify my understanding that my business is authorized to sell only lower-potency beverages. I further understand that in order to sell lower-potency edible products, I must first obtain a Special Use Permit from the City.				

Minnesota Government Data Practices Act Tennessen Warning



The purpose and intended use of the requested data is to verify the applicant meets all state statute and city code provisions and, if the license or permit is approved, to verify that all required data remains current.

The following data collected, created, or maintained is classified under the Minnesota Government Data Practices Act as Private data until license approval when the data becomes Public: (Minn. Stat. § 13.41, Subd. 4).

- 1. Data submitted by applicants (other than names and designated addresses).
- 2. Orders for hearings and findings of fact.
- 3. Conclusions of law and specification of the final disciplinary action contained in the record of the disciplinary action.
- 4. Entire record concerning the disciplinary proceeding.
- 5. License numbers and license status.

(Please initial)

The following data collected, created, or maintained is classified as Private: (Minn. Stat. §13.41, Subd. 2).

- 1. The identity of complainants who have made reports concerning licenses or applicants which appear in inactive complaint data unless the complainant consents to the disclosure.
- 2. The nature or content of unsubstantiated complaints when the information is not maintained in anticipation of legal action.
- 3. Inactive investigative data relating to violations of statutes or rules.
- 4. The record of any disciplinary proceeding except as limited by Minn. Stat. §13.41, Subd. 4.

Under law, private data may be shared with licensing and inspection employees, approval authorities, insurance providers, law enforcement employees, and/or contracted inspection officials as required by court order; this may include City officials who have a bona fide need to review it. The City of Hastings may make any data classified as private or confidential accessible to an appropriate person or agency if the licensing agency determines that failure to make the data accessible is likely to create a clear and present danger to public health or safety.

	I have read and understand the above information regarding my rights as a subject of government data.
Minnes	ota Workers' Compensation
	orkers' compensation policy must be kept in effect at all times by employers in accordance with statutor irements.
	1. I have a worker's compensation insurance policy. Policy information must be listed on the submitted certificate of insurance.
	 2. I am not required to have workers' compensation insurance because: □ I only use independent contractors and do not have employees. □ I do not use independent contractors and do not have employees. □ I use independent contractors and I have employees who are not required to be covered by the workers' compensation law. (Attach an explanation). □ I only have employees who are not required to be covered by the workers' compensation law. (Attach an explanation) See Minn. Stat. 6.176.041 for a list of excluded employees.



Department of Revenue Information

Pursuant to Minn. Stat. § 270C.72 Tax Clearance: Issuance of Licenses, the licensing authority is required to provide the Minnesota Commissioner of Revenue your Minnesota business tax identification number and the social security number or individual taxpayer identification number of each license applicant (person signing the application).

Under the Minnesota Government Data Practices Act and the Federal Privacy Act of 1974, we are required to advise you of the following regarding the use of this information:

- 1. This information may be used to deny the issuance, renewal or transfer of your license in the event you owe the Minnesota Department of Revenue delinquent taxes, penalties, or interest;
- 2. Upon receiving this information, the licensing authority will supply it only to the Minnesota Department of Revenue. However, under the Federal Exchange of Information Agreement the Department of Revenue may supply this information to the Internal Revenue Service;
- 3. Failure to supply this information may jeopardize or delay the processing of your licensing issuance or renewal application.

Please supply the following information for licensing authority: City of Hastings

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Minnesota Tax ID Number:	_ If not available, please attach an explanation.					
Federal Tax ID Number:	_					

Data Practices Notice

Every city in Minnesota must comply with the Minnesota Government Data Practices Act (MGDPA), which, in conjunction with other state and federal laws, classifies all government data. Government data are classified in different categories depending on whether they are accessible by the public.

Government data means all data collected, created, received, maintained or disseminated by the City regardless of its physical form, storage media or conditions of use. There is a presumption that government data are public and are accessible by the public for inspection and copying unless there is a federal law, state statute or temporary classification of data that provides differently.

The data supplied in this application will be used to assess the qualifications for a registration. This data is not legally required but the City will not be able to grant the license without it. If a license is granted, the data will constitute a public record. The data is needed to distinguish this application from others, to identify this application in city license files, to verify the identity of the applicant, to contact the applicant if additional information is required and to determine if the applicant meets all ordinance requirements.

I hereby certify that all statements made in this application are true and complete and understand that any misstatements or omissions of material facts may result in disqualification or denial of the license. I agree to abide by the provisions of this application and all applicable City policies and ordinances.

		, ,			
Signature of Applic	ant			Date	